FORM D

RECEIVED

EXECUTED URIGINAL

UNITED STATES
SECURITIES AND EXCHANGE COMMISSION
Washington, D.C. 20549

FORM D

NOTICE OF SALE OF SECURITIES
PURSUANT TO REGULATION D,
SECTION 4(6), AND/OR
UNIFORM LIMITED OFFERING EXEMPTION



1373709

Name of Offering	g (check if this is an	amendment and name ha	s changed, and indic	ate change.)		
		- Initial Offering	-	- ,		
Filing Under (Ch	eck Box(es) that apply)	: Rule 504	Rule 505	⊠ Rule 506	Section 4(6)	ULOE
Type of Filing:	New Filing	Amendment				
		A. BASIC	CIDENTIFICATION	DATA		
1. Enter the info	ormation requested abou	it the Issuer				
Name of Issuer (check if this is an ar	nendment and name has o	changed, and indicate	e change.)		
Park Re	gency LLC					
Address of Execu	utive Offices (Number	and Street, City, State, Z	ip Code)		Telephone Number (i	including Area Code)
2 Steele Str	eet, Suite 201, Denve	r, Colorado 80206			(303) 320-0003	
Address of Princi	Address of Principal Business Operations (Number and Street, City, State, Zip Code) Telephone Number (including Area Code)					
1875 Fall I	1875 Fall River Drive, Loveland, CO. 80538 (970) 461-1100					
Brief Description	of Business: Constr	uction and operation	of residential assi	isted living com	munity 📮	ROCERCED
Type of Business	3:					
	corporation business trust	☑ limited partnership,☐ limited partnership,	•	other (plea	se specify):	AUS 2 8 2003
	_					THOMSON
Actual or Estima	ted Date of Incorporation	on or Organization:	Month Year 0 6 0 5	¬ _	I Estimated	FININGIAL
Jurisdiction of In	corporation or Organiz	ation: (Enter two-letter U. CN for Canada; Fl	S. Postal Service At N for other foreign j		te;	СО

GENERAL INSTRUCTIONS

Federal:

Who Must File: All issuers making an offering of securities in reliance on an exemption under Regulation D or Section 4(6), 11 CFR 230.501 et seq. or 15 U.S.C. 77d(6).

When To File: A notice must be filed no later than 15 days after the first sale of securities in the offering. A notice is deemed filed with the U.S. Securities and Exchange Commission (SEC) on the earlier of the date it is received by the SEC at the address given below or, if received at that address after the date on which it is due, on the date it was mailed by United States registered or certified mail to that address.

Where to File: U.S. Securities and Exchange Commission, 450 Fifth Street, N.W., Washington, D.C. 20549

Copies Required: Five (5) copies of this notice must be filed with the SEC, one of which must be manually signed. Any copies not manually signed must be photocopies of the manually signed copy or bear typed or printed signatures.

Information Required: A new filing must contain all information requested. Amendments need only report the name of the issuer and offering, any changes thereto, the information requested in Part C, and any material changes from the information previously supplied in Parts A and B. Part E and the Appendix need not be filed with the SEC.

Filing Fee: There is no federal filing fee.

State

This notice shall be used to indicate reliance on the Uniform Limited Offering Exemption (ULOE) for sales of securities in those states that have adopted ULOE and that have adopted this form. Issuers relying on ULOE must file a separate notice with the Securities Administrator in each state where sales are to be, or have been made. If a state requires the payment of a fee as a precondition to the claim for the exemption, a fee in the proper amount shall accompany this form. This notice shall be filed in the appropriate states in accordance with state law. The Appendix to the notice constitutes a part of this notice and must be completed.

ATTENTION

Failure to file notice in the appropriate states will not result in a loss of the federal exemption. Conversely, failure to file the appropriate federal notice will not result in a loss of an available state exemption unless such exemption is predicated on the filing of a federal notice.

A. BASIC IDENTIFICATION DATA Enter the information requested for the following: Each promoter of the issuer, if the issuer has been organized within the past five years; Each beneficial owner having the power to vote or dispose, or direct the vote or disposition of, 10% or more of a class of equity securities of the issuer; Each executive officer and director of corporate issuers and of corporate general and managing partners of partnership issuers; and Each general and managing partner of partnership issuers. □ Promoter Check Box(es) that Apply: ⊠Beneficial Owner Executive Officer ☐ Director Full Name (Last name first, if individual) Steven Cersonsky Business or Residence Address (Number and Street, City, State, Zip Code) 2 Steele Street, Suite 201, Denver, Colorado 80206 Check Box(es) that Apply: Promoter Beneficial Owner Executive Officer ☐ Director Full Name (Last name first, if individual) Katherine L. Ellman Business or Residence Address (Number and Street, City, State, Zip Code) 2 Steele Street, Suite 201, Denver, Colorado 80206 Check Box(es) that Apply: Promoter Beneficial Owner Beneficial Owner Director Full Name (Last name first, if individual) Jerold Bootzin Business or Residence Address (Number and Street, City, State, Zip Code) 2 Steele Street, Suite 201, Denver, Colorado 80206 Check Box(es) that Apply: Promoter Beneficial Owner Beneficial Owner ☐ Director Full Name (Last name first, if individual) Michael Zeitlin Business or Residence Address (Number and Street, City, State, Zip Code) 215 St Paul St, Suite 206, Denver, Colorado 80206 Check Box(es) that Apply: Promoter ☐ Beneficial Owner Executive Officer □ Director General and/or Managing Partner Full Name (Last name first, if individual) Business or Residence Address (Number and Street, City, State, Zip Code) Check Box(es) that Apply: ☐ Promoter ☐ Beneficial Owner Executive Officer ☐ Director ☐ General and/or Managing Partner Full Name (Last name first, if individual) Business or Residence Address (Number and Street, City, State, Zip Code) General and/or Check Box(es) that Apply: Promoter Beneficial Owner Executive Officer ☐ Director Managing Partner Full Name (Last name first, if individual) Business or Residence Address (Number and Street, City, State, Zip Code) Director Beneficial Owner Executive Officer General and/or Check Box(es) that Apply: ☐ Promoter Managing Partner Full Name (Last name first, if individual) Business or Residence Address (Number and Street, City, State, Zip Code)

				В. 1	NFORMA'	TION ABO	UT OFFER	ING				
1. Has the	issuer sold, o	or does the i	ssuer intend	l to sell, to	non-accre	dited invest	ors in this c	ffering?				Yes 🛭 No
			Ans	wer also i	n Append	ix, Column	2, if filing	under ULC	DE.			
2. What is	the minimun	n investmen	t that will b	e accepted	from any	individual?					\$	25,000
3. Does the	offering per	rmit joint ov	vnership of	a single u	nit?							Yes 🔲 No
an assoc broker o	e information emuneration liated person r dealer. If r mation for th	for solicita or agent o nore than fi	tion of purc f a broker ove (5) pers	chasers in coor dealer reconst to be 1	onnection egistered v	with sales ovith the SE	of securities C and/or w	in the offer ith a state	ring. If a pe or states, li	rson to be l st the name	isted is of the	
Full Name	(Last name f	irst, if indiv	idual)				·					
None												
Business or	Residence A	ddress (Nu	mber and S	Street, City	State, Zip	Code)	PALE DES ESPAINANTES DE SAN	maga nga ng ipinggi 100 titi Anti Anti Anti II Palit Anti II Palit Anti	1,6 T (1,4 T	,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,	of the control of the	
Name of As	sociated Bro	ker or Deal	er	artinaraminan	***************************************	TO TO A THE REST OF STEEL AND ARTHUR STEEL	ad ada dha chadh ann ann ann ann ann ann ann ann ann an	adis also accorde alls alls alls alls alls alls alls all	1967 I. die Gelfelle die Belfe zweiberby 26, jb	asyrvenes en	Taglés, de l'Ascensi de Fascensian (ne surcens de l'Ac	CONTRACTOR OF THE PROPERTY OF
N/A				arapanangangayarararahinda								
States in wh	ich Person h	as solicited	or intends t	to solicit P	urchasers							
(Check '	'All States" o	or check ind	lividual Sta	tes)			•••••		•••••		[All States
[AL]	[AK]	[AZ]	[AR]	[CA]	[CO]	[CT]	[DE]	[DC]	[FL]	[GA]	[HI]	[ID]
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[MT]	[NE]	[NV]	[NH]	[NJ]	[NM]	[NY]	[NC]	[ND]	[OH]	[OK]	[OR]	[PA]
[RI]	[SC]	[SD]	[TN]	[TX]	[UT]	[VT]	[VA]	[WA]	[WV]	[WI]	[WY]	[PR]
Full Name	(Last name f	irst, if indiv	idual)									
Business or	Residence A	ddress (Nu	mber and S	Street, City	, State, Zip	Code)	MININTERNALITAT NAMANTRATINATINA (NA TINATINA		***************************************		1975,684,784,984,984,984,984,984,984,984,984,984,9	
Name of As	sociated Bro	ker or Deal	er	LOTERIY, OTS, OTS, OTS, OTS, OTS, OTS, OTS, OTS	***************************************						etapeta eta eta eta eta eta eta eta eta eta	
States in wh	ich Person h	as solicited	or intends	to solicit P	urchasers		***************************************		***************************************	ra (111.07.1179-1177) + 117-127-1-1281 117-117-1184(18417		PERIODITI PREMIUTI EMPROPRIO EMPORE
(Check	'All States"	or check ind	lividual Sta	tes)					************		[All States
[AL]	[AK]			•		[CT]	[DE]	[DC]	[FL]	[GA]	[HI]	[ID]
[IL]	[IN]	[IA]	[KS]	[KY]	{LA}	[ME]	[MD]	[MA]	[MI]	[MN]	[MS]	[MO]
[MT]	[NE]	[NV]	[NH]	[NJ]	[NM]	[NY]	[NC]	[ND]	[OH]	[OK]	[OR]	[PA]
[RI]	[SC]	[SD]	[TN]	[TX]	[UT]	[VT]	[VA]	[WA]	[WV]	[WI]	[WY]	[PR]
Full Name	(Last name f	first, if indiv	idual)									
Business or	Residence A	Address (Nu	imber and S	Street, City	, State, Zip	Code)						
Name of As	sociated Bro	ker or Deal	er		***************************************						and the state of t	DESTRUCTION ACCUSATION OF THE PROPERTY OF THE
States in wh	ich Person h	nas solicited	or intends	to solicit P	urchasers	annia annia annia annia annia annia a	paritaritaritaritaritaritaritaritaritarit	91.84491493149141414141414141414141414141		arrytatatorathatututut ahanymenen	***************************************	latus testus katilatistas katipatanna tun garanganan.
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[MT]	[NE]	[NV]	[NH]	[NJ]	[NM]	[NY]	[NC]	[ND]	[OH]	[OK]	[OR]	[PA]
[RI]	[SC]	[SD]	[TN]	[TX]	[UT]	[VT]	[VA]	[WA]	[WV]	[WI]	[WY]	[PR]

C. Offering Price, Number of Investors, Expenses and Use of Proceeds

1.	Enter the aggregate offering price of securities included in this offering & the total amount already sold. Enter "0" if answer is "none" or "zero". If the transaction is an exchange offer, check this box \(\subseteq \) & indicate in the columns below the amounts of the securities offered for exchange already exchanged.	Aggregate	Am	ount Already
	Type of Security	Offering Price		Sold
	Debt	S	\$	•••••
	Equity: Common Preferred.	S	\$	
	Convertible Securities (including warrants)	S	\$	
	Limited Partnership Interests	S	\$	***************************************
	Other (Specify - LLC Membership Interests)	1,650,000	\$	1,650,000
	Total	1.650,000	\$	1,650,000
	Answer also in Appendix, Column 3, if filing under ULOE.		-	
2.	Enter the number of accredited and non-accredited investors who have purchased securities in this Offering and the aggregate dollar amounts of their purchases. For offerings under Rule 504, indicate the number of persons who have purchased securities and the aggregate dollar amount of their purchases on the total lines. Enter "0" if the answer is "None" or "Zero".	Number of Investors		llar Amount f Purchases
	Accredited Investors	30	\$	1,650,000
	Non-accredited Investors	0	\$	0
	Total (for filings under Rule 504 only)	N/A	\$	N/A
	Answers also in Appendix, Column 4, filing under ULOE.			
3.	If this filing is for an offering under Rule 504 or 505, enter the information requested for all securities sold by the issuer, to date, in offerings of the types indicated, in the twelve (12) months prior to the first sale of securities in this offering. Classify securities by type listed in Part C-Question 1.	Type of	Do	llar Amount
	Type of Offering	Security		Sold
	Rule 505	N/A	\$	N/A
	Regulation A	N/A	\$	N/A
	Rule 504	N/A	\$	N/A
	Total	N/A	\$	N/A
4.	a. Furnish a statement of all expenses in connection with the issuance and distribution of the securities in this offering. Exclude amounts relating solely to organization expenses of the issuer. The information may be given as subject to future contingencies. If the amount of an expenditure is not known, furnish an estimate and check the box to the left of the estimate.			
	Transfer Agent's Fees		\$.
	Printing & Engraving Costs	⊠	\$	5,000
	Legal Fees		\$	10,000
	Accounting Fees		\$.
	Architectural/Engineering Fees		\$.
	Sales Commissions (specify finders' fees separately) plus expense allowance		\$	
	Other Expenses (identify)		\$	
	Total	⊠	\$	15,000

	C. Offering Price	, Number of Investors, Expenses	AND USE OF PROCEEDS	;	
4.	b. Enter difference between the aggregate offe total expenses furnished in response to Part proceeds to the issuer"	C - Question 4.a. This difference is the "a	idjusted gross	\$ <u>.</u>	1,635,000
5.	Indicate below the amount of the adjusted gross each of the purposes shown. If the amount for check the box to the left of the estimate. The to proceeds to the issuer set forth in response to Pa	or any purposes is not known, furnish an stal of the payments listed must equal the a	estimate and		Payments to Others
	Salaries and fees		\$ <u></u>	🗆 \$	
	Purchase of Real Estate		\$	⊠ \$ <u>.</u>	837,000
	Purchase rental or leasing and installation	of machinery & equipment	\$	D \$	
	Construction or leasing of plants & facilit	ies	\$	 \$	
	Acquisitions of other businesses (inclu offering that may be used in exchar pursuant to a merger)	ding the value of securities involved inge for the assets or securities of another	issuer	 \$	
	Repayment of indebtedness				
	Working capital				
	Other (specify: Entitlements Costs				
	Raw Water Allocation				
	Aremeetarav.nigmeering.com		Ш Ψ	EN 9	250,000
	Column Totals		\$	×_	1,635,000
	Total Payments Listed	d (column totals added)	S ₌	1,6.	<u>35,000</u>
		D. FEDERAL SIGNATURE	·	,,	
sig	he issuer has duly caused this notice to be signed mature constitutes an undertaking by the issuer to formation furnished by the issuer to any non-accor-	by the undersigned duly authorized pers to furnish to the U.S. Securities and Exch	ange Commission, upon w		
_	euer (Print or Type)	Signature	-	Date	
	Park Regency LLC	Katherine Z Title of Signer	Cllman	August /	<u>6</u> ,2006
Na	me of Signer	Title of Signer	mgr.		
	Katherine L. Ellman	Manager			

ATTENTION

Intentional misstatements or omissions of fact constitute federal criminal violations (See 18 U.S.C. §1001).

	E. STATE SIGNATURE
1.	Is any party described in 17 C.F.R. 230.252(c), (d), (e) or (f) presently subject to any of the disqualification provisions of such rule?
	See Appendix, Column 5, for state response.
2.	The undersigned issuer, hereby undertakes to furnish to any state administrator of any state in which this notice is filed, a notice on Form D (17 CFR §239.500) at such times as required by state law.
3.	The undersigned issuer hereby undertakes to furnish to the state administrators, upon written request, information furnished by the issuer to offerees.
4.	The undersigned issuer represents that the issuer is familiar with the conditions that must be satisfied to be entitled to the Uniform Limited Offering Exemption (ULOE) of the state in which this notice is filed and understands that the issuer claiming the availability of this exemption has the burden of establishing that these conditions have been satisfied.
	ne issuer has this notification and knows the contents to be true and has duly caused this notice to be signed on its behalf by the undersigned ally authorized person.
Iss	suer (Print or Type) Signature Date

Issuer (Print or Type)	Signature	Date
Park Regency LLC	X atherine 2	August 16, 2006
Name of Signer	Title of Signer	mgr.
Katherine L. Ellman	Manager	·

Instruction: Print the name and title of the signing representative under his signature for the state portion of this form. One copy of every notice on Form D must be manually signed. Any copies not manually signed must be photocopies of the manually signed copy or bear typed or printed signatures.